PTO/SB/05 (08-03)
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UTILITY
PATENT APPLICATION
TRANSMITTAL

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Attorney Docket No.		ey Docket No.	342312005300				
	First Inventor COMPOSIT Title TREATING	Marco CAVALERI					
	Title	COMPOSITIONS AND METHODS FOR TREATING BACTERIAL INFECTIONS WITH					
ı		PROTEIN-DALBAVANCIN COMPLEXES					
	Expres	s Mail Label No.	EV336629122US				

Expre	ss Mail Label No. EV336629122US					
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Fee Transmittal Form (e.g., PTO/SB/17) (2 pages) (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)					
2. Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
3. X Specification [Total Pages 80]	a. Computer Readable Form (CRF)					
(preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence tisting, a table, or a computer program listing appendix	b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper C. Statements verifying identity of above copies					
Background of the Invention Brief Summary of the Invention	ACCOMPANYING APPLICATION PARTS					
 Brief Description of the Drawings (if filed) Detailed Description Claim(s) 	9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of					
- Abstract of the Disclosure	10. Statement Power of Attorney					
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 13]	11. English Translation Document (if applicable)					
5. Oath or Declaration [Total Sheets]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
a. Newly executed (original or copy)	13. Preliminary Amendment					
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S)	15. Certified Copy of Priority Document(s)					
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
See 37 Cr N 1.05(0)(2) and 1.55(0).	17. Other:					
6. X Application Data Sheet. See 37 CFR 1.76 (5 pages)						
18. If a CONTINUING APPLICATION, check appropriate box, and sup, specification following the title, or in an Application Data Sheet under 3:						
Continuation Divisional Continuation-in-part						
Prior application information: Examiner	Art Unit:					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclos under Box 5b, is considered a part of the disclosure of the accompanyl reference. The incorporation can only be relied upon when a portion has						
19. CORRESPO	ONDENCE ADDRESS					
X Customer Number 25226	OR Correspondence address below					
Name						
Address						
City State	Zip Code					
Country Telephone	Fax .					
Name (Print/Type) EriC H. Witt // Registration No. (Attomey/Agent) 44,408						
Signature	Date November 14, 2003					

I hereby c	ertify that this corre	respondence is being deposited with the U.S. Postal Service as Expr	ress Mall, Airbill No. EV336629122US
date show	elope addressed to: /n below.	respondence is being deposited with the U.S. Postal Service as Expro: MS Patent Application, Commissioner for Patents, P.Ø. Box 1450	, Alexandria, VA 22313-1450, on the
Dated:	11/14/03	Signature	(Fric H Witt)

PTO/SB/17 (10-03)

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		Complet if Known						- 1
FEE TRANSMITTAL	Application Number				- 1	Not Yet Assigned		
for EV 2004	Filing Date			Concurrently Herewith				
for FY 2004	First Named Inventor					Marco CAVALERI		
Effective 10/01/2003, Patent fees are subject to annual revision.	Examiner Name					Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27					Not Yet A			
TOTAL AMOUNT OF PAYMENT (\$) 3404.00	Art Unit Attorney Docket No.				34231200			
		Auom	ey Du					
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)	
Check Card Money Other None	3. ADDITIONAL FEES							
X Deposit Account:				•				
Deposit 02 4050		Entity	_	Entity	-			
Account 03-1952 Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	ription	Fee Paid
Deposit Magican & Foografus LLD	1051	130	2051	65	Surcharge -	- late filing fe	e or oath	
Account Name Morrison & Foerster LLP	1052	50	2052	25	-	-	onal filing fee or cover	
The Director Is authorized to: (check all that apply)	1032	- 30	2032	23	sheet.	·	Ū	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	h specification	n . ˈ	
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a r	equest for ex p	arte reexamination	
Charge fee(s) indicated below, except for the filling fee	1804	920*	1804	920*	Requesting Examiner a	publication o	f SIR prior to	
to the above-identified deposit account.	1805	1,840°	1805	1,840*	Requesting	publication o	f SIR after	
FEE CALCULATION	1251	110	2251	55	Examiner a Extension f	ection for reply within	n first month	
1. BASIC FILING FEE	1252	420	2252				second month	
Large Entity Small Entity	1253	950	2253			or reply within		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension (for reply within	fourth month	
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension f	or reply within	i fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of A			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brie	ef in support o	f an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for	r oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451				lic use proceeding	
SUBTOTAL (1) (\$) 770.00	1452 1453	110	2452 2453	55 665		revive – unav		
2. EVEDA OLAIM EEEC EOD HELLEV AND DEIGOLE	1501	1,330 1,330	2501			revive - uninte e fee (or reisse		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1502	480	2502	240	Design issu	•	16)	
Claims below Fee Paid Total Claims 112 -20** = 92 x 18.00 = 1656.00	1503	640	2503	320	Plant issue			\vdash
Independent 11 -3** = 8 x 86.00 = 688.00	1460	130	1460	130	-	the Commiss	sioner	\vdash
Claims	1807	50	1807	50		fee under 37		
	1806	180	1806	180	-		on Disclosure Stmt	\vdash
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	8021	40		40	Recording	each patent a	ssignment per	
Code (\$) Code (\$) Fee Description			8021		property (ti	mes number o	of properties)	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1.		final rejection	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		dditional inver		
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385		examined (37CFR 1.129(b)) Request for Continued Examination (RCE)		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900		r expedited ex	kamination	
and over original patent	Other	ا ee (spea	ify)		or a uesign	аррисации		
SUBTOTAL (2) (\$) 2634.00		ced by E		ling Fee	Paid	SUBTO	TAL (3) (\$)	0.00
**or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY						(Complete	(if applicable))	
Name (Print/Type) Eric H-Witt		ration No ey/Agent)	44	,408		Telephone	(650) 813-5755	
Signature Date November 14, 2003						2003		
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